

ONE HUNDRED FOURTEENTH CONGRESS
Congress of the United States
House of Representatives
COMMITTEE ON ENERGY AND COMMERCE
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July 21, 2015

Ms. Joan Alker
Executive Director
Center for Children and Families
Georgetown University
3300 Whitehaven Street, N.W.
Washington, D.C. 20057

Dear Ms. Alker:


Thank you for appearing before the Subcommittee on Health on June 24, 2015, to testify at the hearing entitled "Examining the Administration's Approval of Medicaid Demonstration Projects."

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

To facilitate the printing of the hearing record, please respond to these questions with a transmittal letter by the close of business on August 4, 2015. Your responses should be mailed to Graham Pittman, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, D.C. 20515 and e-mailed in Word format to graham.pittman@mail.house.gov.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,


Joseph R. Pitts
Chairman
Subcommittee on Health

cc: The Honorable Gene Green, Ranking Member, Subcommittee on Health

Attachment

Attachment — Additional Questions for the Record

The Honorable Representative Capps

The flexibility provided by the 1115 (eleven-fifteen) waiver has given some states the opportunity to innovate, but also to prepare. For example, in my home state of California, our last waiver was used as a glide-path to Medicaid expansion, allowing it to start expanding coverage to poor adults starting in April 2010, almost 3 years before the ACA's Medicaid expansion was to take effect. This allowed for a more smooth transition, helping our communities prepare and ramp up the expansion over time. California was able to systematically enroll new Medicaid beneficiaries, avoid some of the hurdles faced in other states, and ultimately increase access for beneficiaries.

1. Ms. Alker, can you talk about other ways the waiver has helped states move towards policies already being implemented at the federal level?

The early-expansion waiver in California was a key step in the success of full ACA expansion in 2014. And it has been largely successful, getting many of the newly-covered population covered and allowing the state to now target its resources to enroll the harder-to-insure Americans. Our uninsured rate has dropped 50%-that is a huge accomplishment. Waivers are not just for getting ahead of larger program changes, they also spur innovation. When demonstration projects under the waivers are successful, they are then used as best practices for other states to follow. For instance, Iowa became the first state to offer supportive employment services to individuals with mental illness in 2007. I am proud that my home state of California followed Iowa's lead in our own waiver to ensure that individuals are empowered to be productive members of society.

2. Ms. Alker, can you talk about how these demonstration projects are evaluated and then replicated in other states?